

**Kansas Corporation Commission  
Oil & Gas Conservation Division  
REQUEST FOR CHANGE OF OPERATOR  
TRANSFER OF INJECTION OR SURFACE POND PERMIT**

Form T-1  
June 2000  
Form must be Typed  
Form must be Signed  
All blanks must be Filled

Check Applicable Boxes:

☐ Oil Lease: No. of Wells \_\_\_\_\_☒ Gas Lease: No. of Wells 1

\*\* Side Two Must Be Completed \*\*

☐ Saltwater Disposal Well - Docket No. \_\_\_\_\_

Spot Location: \_\_\_\_\_ feet from N / S Line

\_\_\_\_\_ feet from E / W Line

☐ Enhanced Recovery Proj. Docket No. \_\_\_\_\_Entire project: ☐ Yes ☐ No

Number of injection wells \_\_\_\_\_

Field Name EUBANKEffective Date of Transfer 12/1/2004Lease Name CLAWSON B-1 (PAWNEE)\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - 9 Sec 29 T 34 R ☐ East ☒ West

Legal Description of Lease: \_\_\_\_\_

County HASKELLProduction Zone(s) PAWNEE

Injection Zone(s) \_\_\_\_\_

Surface Pond Permit # \_\_\_\_\_

(API No. If Drill Pit)

\_\_\_\_\_ Feet from N / S Line of Section

\_\_\_\_\_ Feet from E / W Line of Section

Identify: ☐ Emergency Pit☐ Burn Pit☐ Storage Pit☐ Drill PitPast Operator's License No. 4549Contact Person: JIM LAFEVERSPast Operator's Name and Address ANADARKO PETROLEUMPhone 832-636-31271201 Lake Robbins Dr. Texas 77380Date 11/23/2004Title ENVIRONMENT AND REGULATORY AFFAIRS SUPERVISORSignature Jim LafeversNew Operator's License No. 32446Contact Person: LYNNE MOON

**RECEIVED  
KANSAS CORPORATION COMMISSION**

**DEC 20 2004**New Operator's Name and Address MERIT ENERGY COMPANYPhone 972-701-837713727 NOEL ROAD SUITE 500Oil/Gas Purchaser NCRA

CONSERVATION DIVISION  
WICHITA, KS

DALLAS, TEXAS 75240Date 11/29/2004Title SR. LAND/REGULATORY ADMINISTRATORSignature Lynne Moon

**Acknowledgment of Transfer:** The above request for transfer of injection authorization, surface pond permit # \_\_\_\_\_, has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgement of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pond permit.

\_\_\_\_\_ is acknowledged as the  
new operator and may continue to inject fluids as authorized by  
Docket# \_\_\_\_\_. Recommended action \_\_\_\_\_

Date \_\_\_\_\_

Authorized Signature

\_\_\_\_\_ is acknowledged as the  
new operator of the above named lease containing the surface pond  
permitted by # \_\_\_\_\_

Date \_\_\_\_\_

Authorized Signature

12/28/05 MAR 07 2005 3/1/05

*Must Be Filled For All Wells*

\* Lease Name

CLAWSON B-1 (PAWNEE)

\* Location

Well No.

API No.  
(YR DRLD/PRE '67)

Footage from Section Line  
(i.e. FSL=Feet from South Line)

Type of Well  
(Oil/Gas/INJ/WSW)

Well Status  
(PROD/TA'D/Abandoned  
)

[illegible]

*A separate sheet may be attached if necessary*

\*When transferring a unit which consists of more than one lease please file a separate side for each lease. If a lease covers more than one section please indicate which section each well is located.